VIRGINIA:

#### BEFORE THE VIRGINIA GAS AND OIL BOARD

APPLICANT: CNX GAS COMPANY LLC

DIVISION OF GAS AND OIL DOCKET NO. 89-0126-0009-46

RELIEF SOUGHT: MODIFICATION OF THE OGCB NORA FIELD RULES ORDER ENTERED MARCH 26, 1989, AS AMENDED, TO ALLOW MORE THAN ONE COALBED GAS WELL TO BE DRILLED IN THE UNITS IDENTIFIED ON EXHIBIT A HERETO

LEGAL DESCRIPTION: DRILLING UNITS AP-81 and AU-92; LOCATED IN BUCHANAN COUNTY, VIRGINIA; SEE ANNEXED EXHIBIT A1 AND STATE PLANE COORDINATE DESCRIPTION AT PARAGRAPH 7.h. WITHIN

# REPORT OF THE BOARD FINDINGS AND ORDER

- 1. <u>Hearing Date and Place</u>: This matter came on for hearing before the Virginia Gas and Oil Board (hereinafter "Board") at 9:00 a.m. on **April 21, 2009** at the Southwest Virginia Higher Education Center on the campus of Virginia Highlands Community College, Abingdon, Virginia.
- 2. <u>Appearances:</u> Mark A. Swartz, Esquire, appeared for the Applicant; and Sharon M.B. Pigeon, Assistant Attorney General was present to advise the Board.
- 3. <u>Jurisdiction and Notice</u>: Pursuant to sections 45.1-361.1 et seq., Virginia Code, as amended, the Board finds that it has jurisdiction over the subject matter. Based upon the evidence presented by the Applicant, the Board also finds that the Applicant has (1) exercised due diligence in conducting a meaningful search of reasonably available sources to determine the identity and whereabouts of each gas and oil owner, coal owner, or mineral owner, or in the case of conflicting claims to the ownership of the coalbed methane gas, each person identified by Applicant as a potential owner of the coalbed methane gas underlying the area described at paragraph 7.h below and in **Exhibit A** attached hereto; and (2) has given notice to all parties so identified (hereinafter sometimes "person(s)" whether referring to individuals, corporations, partnerships, associations, companies, businesses, trusts, joint ventures or other legal entities) and

entitled by §§ 45.1-361.19 and 45.1-361.20, Virginia Code, as amended, to notice of this Application, and (3) that the persons listed in the Notice of Hearing are the persons so identified by the Applicant. Further, the Board has caused notice of this hearing to be published as required by § 45.1-361.19.B., Virginia Code, as amended. Whereupon, the Board hereby finds that the notices given satisfy all statutory requirements, Board rule requirements and the minimum standards of State due process.

4. Amendments and Dismissals: None.

3

- 5. Relief Requested: (1) Modification of the Nora Gas Field Rules to allow more than one coalbed methane gas well to be drilled within each of the Nora Field Drilling Units identified above and in **Exhibit A1** attached hereto; and (2) for an administrative order providing that additional well permits may be issued in the Nora Field after this Application is filed and while it is pending.
- 6. <u>Relief Granted:</u> Available data and the evidence adduced at the hearing support Applicant's position that the production from the pool underlying the Nora Coal Bed Gas Field Drilling Units in question would be enhanced and benefit from in-field drilling; accordingly,
  - a. With regard to the Drilling Units described above and in **Exhibit A1** hereto, the Nora Coal Bed Gas Field Rules Order, OCGB order entered of March 26, 1989, is hereby amended to allow the Board's Designated Unit Operator in Drilling Units pooled by Board Order and the Well Operator/Permittee in voluntary Drilling Units to drill a total of two wells, said total to include any previously permitted wells, within the units affected by the Application and this Order;
  - b. In the event that an additional coalbed methane gas well(s) permitted and drilled after the entry of this order is located within the drilling window(s) of a Nora Coal Bed Gas Field Drilling Unit affected by this order, the production therefrom shall be solely attributed to and allocated to the Nora Drilling Unit within which the wells are located. Such well(s) will be subject to any existing pooling orders, and no further Board appearance or action will be required:
  - c. In the event a second well is proposed that is to be located outside the drilling window of any Nora Unit affected by this order and a permit application is submitted to the Division of Gas and Oil seeking such location exception, the Inspector shall assess the permit as follows:
    - (i) If an 58 acre square with the proposed well at its center lies entirely within Nora Drilling Units which are voluntary in nature and are not subject to existing pooling orders, the Inspector may grant or deny the location exception on a case-by-case basis according to standard procedures and provisions of the Nora Order which allow wells to be drilled outside drilling windows; or

11'54" E 1600.06 feet to a point of beginning, containing +/-69.84 acres. (AP-81)

Beginning at a point, Virginia State Plane NAD 27 coordinate of N: 310166.240 E: 955189.890; S87° 50'06" E 1369.56 feet to a point; S02° 13'15" W 1925.13 feet to a point; N87° 46'45" W 1369.57 feet to a point; N02° 13'16" E 1923.80 feet to a point of beginning, containing +/- 60.49 acres. (AU-92)

- i. Having considered the evidence presented, the Board found no reason to establish any allowable production rates for the wells contemplated by this Modification Order;
- j. Except as herein specifically modified, the proposed Drilling Units more fully described above and in **Exhibit A1** attached hereto shall be developed and produced in compliance with the OGCB Order entered on 3-26-89 regarding the Nora Field, as amended.
- k. This Modification Order shall be effective as of the date of the hearing, to-wit: April 21, 2009.
- 8. <u>Conclusion:</u> The relief granted hereby will assist in enhancing production from existing wells, will assist in more efficiently recovering coalbed methane gas from the area in question, will prevent waste, and will continue to protect the correlative rights of all owners and claimants. Therefore, the relief and all terms and provisions set forth above be and are hereby granted and IT IS SO ORDERED.
  - 9. Effective Date: April 21, 2009.

DONE AND EXECUTED majority of the Virgini	this 20 day of , 2009, by a la Gas and Oil Board
	Chairman Bradley C. Lambert
DONE AND PERFORME of this Board.	David E. Asbury, Jr.  Principal Executive To The Staff Virginia Gas and Oil Board
STATE OF VIRGINIA	

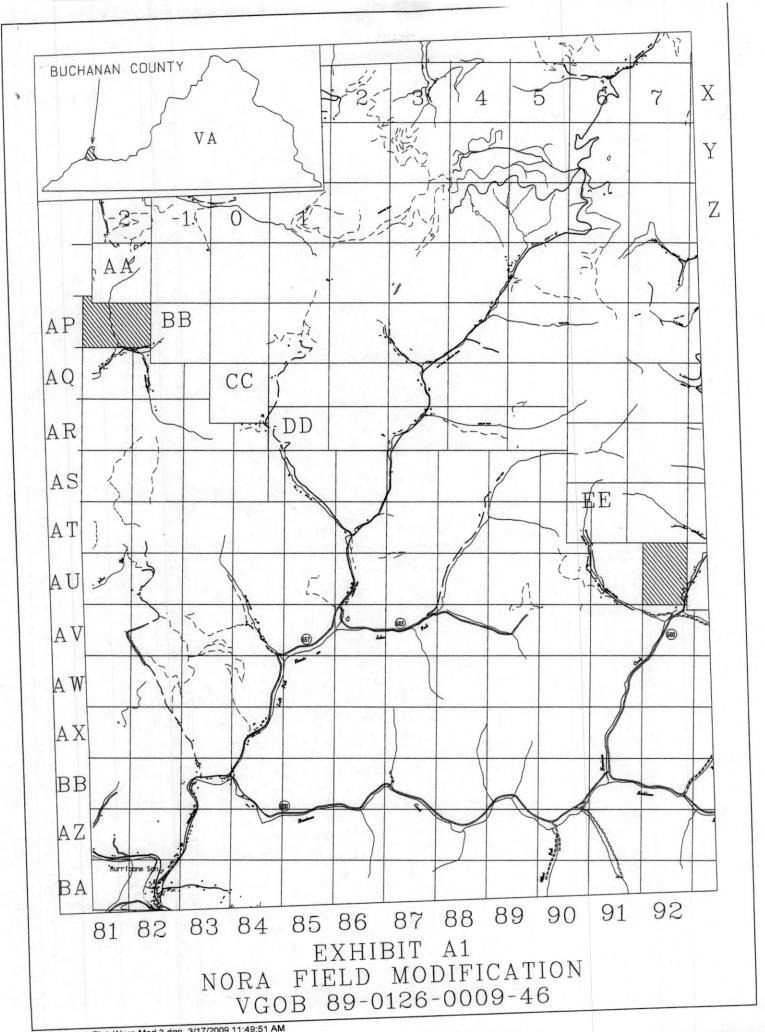
Acknowledged on this 2 day of \_\_\_\_\_\_\_\_\_, 2009, personally before me a notary public in and for the Commonwealth of Virginia, appeared Bradley C. Lambert, being duly sworn did depose and say that he is Chairman of the Virginia Gas and Oil Board, and appeared David E. Asbury, Jr., being duly sworn did depose and say that he is Principal Executive to the Staff of the Virginia Gas and Oil Board that they executed the same and were authorized to do so.

COUNTY OF WASHINGTON

Diane J. Davis Notary 174394

My commission expires: September 30, 2009





### AFFIDAVIT OF DUE DILIGENCE

## COMMONWEALTH OF VIRGINIA COUNTY OF BUCHANAN

I, Anita D. Duty, after being duly sworn upon oath, state as follows:

- 1. I am a Pooling Supervisor of CNX Gas Company LLC and am responsible for the notification process required by Va. Code Ann. §45.1-361.19 and VR 480-05-22.2 §4.
- 2. That CNX Gas Company LLC has exercised due diligence in attempting to locate and notice all owners and claimants who are unleased and/or who were not previously pooled by prior order(s) of the Virginia Gas and Oil Board regarding the Nora Field Modification / Infill Drilling Modification #46, all as required by Va. Code Ann. §45.1-361.19 and VR 480-05-22.2.
- 3. That on March 20, 2009 a true and correct copy of the Notice of Hearing with Exhibits will be mailed, via certified mail return receipt requested, to all owners and claimants listed in Exhibit B-3 for whom mailing addresses were then available.
- 4. That every individual or entity having an unleased or unpooled interest in the methane gas underlying the tracts in the **Nora Field Modification / Infill Drilling Modification #46**, whether known or unknown, including those persons whose mailing address were unknown, was notified of the filing of CNX Gas Company LLC's application by publication of the Notice of Hearing in the *Bluefield Daily Telegraph*.
- 5. That CNX Gas Company LLC will continue to exercise due diligence in attempting to locate and identify the names and/or addresses of any unknown or unlocatable parties and, if located or identified, will notify them of CNX Gas Company LLC's application.

Docket No. VGOB 89-0126-0009-46 Affidavit of Due Diligence

I have read the foregoing, and the information given above is true and correct to the best of my knowledge and belief.

Anita D. Duty
Pooling Supervisor

for CNX Gas Company LLC

#### **ACKNOWLEDGMENT**

STATE OF WEST VIRGINIA

**COUNTY OF MERCER, TO-WIT:** 

TAKEN, SUBSCRIBED AND SWORN to before me this \_\_\_\_\_\_\_ day of

Jail , 2009.

Notary Public

My commission expires: Secenter 4, 2016

OFFICIAL SEAL
NOTARY PUBLIC
STATE OF WEST VIRGINIA
DIANA M. MURPHY
CNX GAS COMPANY LLC
2481 JOHN NASH BLVD.
BLUEFIELD, WV 24701
y commission expires December 4, 2016

2

PLICANT: CNX Gas Company LLC
LIEF SOUGHT: MODIFICATION OF
NORA COAL BED GAS
FELD RULES ORDER
FECTED UNITS: AP-81 and AU-92
a nanexed Exhibit A
NOTICE OF USANDOIL
DIVISION OF GAS AND OIL
DIVISION OF

NOTICE OF HEARING
April 21, 2098
Spithwest Virginia Higher Education Center
Campus of the Virginia Highlands Community College
Abingdon, Virginia
9:00 AM

Campus of the Virginia Highlands Community College Abinadon, Virginia

NMONWEALTH OF VIRGINIA:
Levisa Coal Corporation, ACIN, LLC, Fairview Limited Partnership, Carol & John C. Levisa Coal Corporation, ACIN, LLC, Fairview Limited Partnership, Carol & John C. Levisa Coal Corporation, ACIN, LLC, Fairview Limited Partnership, Carol & John C. Levisa Coal Corporation, ACIN, LLC, Fairview Limited Partnership, Carol & John C. Levisa Coal Face Coal Set Gas Field Set Period Coal Face Coal F

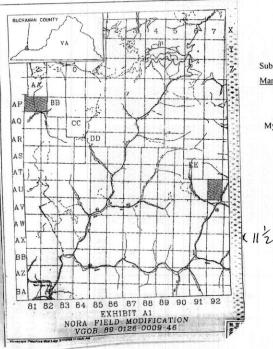
on, vrignia, and triet notice will be published.

AUTICE IS FURTHER GIVEN that you may attend this hearing, with or without an attorious, and offer evidence or state any comments you have. For further information or a ey, and offer evidence or state any comments you have. For further information or a explication and exhibits, either contact the Virginia Gas and Oil Board, State of all and Gas inspector. Department of Mines, Minerals and Energy, Division of Gas and Nil, P. O. Box 1416, Abingdon, Virginia 24210, 276/676-5423 or the Applicant at the adress shown below.

ATED: 3/20/09

CNX Gas Company LLC.

Applicant
By: Anita D. Duty
Pooling Supervisor
for CNX Gas Company LLC
2481 John Nash Blvd.
Bluefield, West Virginia 24701



#### CERTIFICATE OF PUBLICATION

State of West Virginia,  T  County of Mercer,	o-wit:-
Sandra T. Carro	of the
Bluefield Daily Telegraph, a daily new Bluefield, Mercer County, West Virg	
attached hereto under the caption;	
attached hereto under the caption; was published in the said <u>Bluefie</u>	ld Daily Telegraph
overein • tropic outervers and outer more known	ld Daily TelegraphTime(s)
was published in the said <u>Bluefie</u>	Time(s)
was published in the said <u>Bluefie</u> One (1)	Time(s)

Sandy I Could

Subscribed and sworn to before me this 26th March 2009.

My Commission expires Delle 2018.

Dema Herald

OFFICIAL SEAL MOTARY PUBLIC STATE OF WEST VIRGINIA TERESA HERALD BLUCFIELD DAILY TELEGRA 922 BLUCFIELD, WY 24701 by commission expires December 16.

Michelle Townsend 3	☐ Agent☐ Addressee☐ Date of Delivery	<ul> <li>Complete items 1, 2, and 3. Also compitem 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reso that we can return the card to you.</li> <li>Attach this card to the back of the mail or on the front if space permits.</li> </ul>	verse	A. Signature  X. Mills Cru  B. Recound by (Printer/Naurie)  Mills B.	Agent Addressee C. Date of Delivery
If YES, enter delivery address below:	□ No	1. Article Addressed to:	(\$2.5) TWO		
Huntington, Was	705 -3247	Sidney Asbury, et vir 4561 Scenic View Dr			
		Pegram, TN 37143	l	3. Service Type	
☑ Certified Mail ☐ Express Mail	for Merchandise			☑ Certified Mail ☐ Express Mail	pt for Merchandise
4. Restricted Delivery? (Extra Fee)	☐ Yes	Nora 4. Fp		4. Restricted Delivery? (Extra Fee)	☐ Yes
3230 0002 4135 4826		Article Number     (Transfer from service label)	7008 3	230 0002 4135 4833	
leturn Receipt	102595-02-M-1540	PS Form 3811, February 2004	Domestic Ret	urn Receipt	102595-02-M-1540
COMPLETE THIS SECTION ON DELIVE	RY	SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIC	/ERY
A. Signature	ПАння		oloto	A. Signature	
× M /		Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	piete	6.1	☐ Agent
		Print your name and address on the re- so that we can return the card to you.			C. Date of Delivery
D. Is delivery address different from item 1		Attach this card to the back of the mail or on the front if space permits.	lpiece,		1 001
If YES, enter delivery address below:	□ No	Article Addressed to:	7	If YES, enter delivery address below	A CONTRACTOR OF THE PROPERTY O
		그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	Trust		
3. Service Type				T	
☐ Registered ☐ Return Receipt	for Merchandise	Richmond, TX 77469			ipt for Merchandise
Restricted Delivery? (Extra Fee)	☐ Yes			☐ Insured Mail ☐ C.O.D.	☐ Yes
A 3230 0002 4135 4840	1				
		(Transfer from service (LOEI)	7008 3	3230 0002 4135 4857	
teturn Heceipt	102595-02-M-1540	PS Form 3811, February 2004	Domestic Re	turn Receipt	102595-02-M-1540
		e lanca			
COMPLETE THIS SECTION ON DELIVER	RY	SENDER, COMPLETE THE SECTION	and the same	COMULETE THIS SECTION ON BELLIN	Env
	TOWNSHIP SHOW				EHY
12	☐ Agent	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> </ul>	lete	A Signature	☐ Agent
1		<ul> <li>Print your name and address on the rev</li> </ul>	verse	and lugar	☐ Addressee
			piece.	B. Received by ( Printed Name)	Date of Delivery
D. Is delivery address different from item 1?	201-1	or on the front if space permits.		LANDON WATER	5.11.07
	□ No			D. Is delivery address different from item	
If YES, enter delivery address below:	L 140	Article Addressed to:			
If YES, enter delivery address below:	L 140	Article Addressed to:		If YES, enter delivery address below:	
If YES, enter delivery address below:	LI NO		3		
If YES, enter delivery address below:	LINO	Article Addressed to:  Harrison-Wyatt, LLC PO Box 11000	3		
If YES, enter delivery address below:	LI NO	Harrison-Wyatt, LLC	3	If YES, enter delivery address below:	
3. Service Type Si Certified Mail  Express Mail		Harrison-Wyatt, LLC PO Box 11000	3	If YES, enter delivery address below:  3. Service Type	
3. Service Type  Ø Certified Mail		Harrison-Wyatt, LLC PO Box 11000	3	S. Service Type  G. Certified Mail	
3. Service Type  Sill Certified Mail Registered Return Receipt to C.O.D.		Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543		3. Service Type  20 Certified Mail   Express Mail   Registered   Return Receig	□ No
3. Service Type  Geriffied Mail Express Mail Registered Return Receipt to C.O.D.  4. Restricted Delivery? (Extra Fee)	for Merchandise	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543		3. Service Type  22 Certified Mail   Express Mail   Registered   Return Receip   Insured Mail   C.O.D.  4. Restricted Delivery? (Extra Fee)	ot for Merchandise
3. Service Type  GO Certified Mail	for Merchandise	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543		3. Service Type  20 Certified Mail   Express Mail   Registered   Return Receig	ot for Merchandise
3. Service Type  SC Certified Mail Express Mail Registered Recipt C.O.D. 4. Restricted Delivery? (Extra Fee)	for Merchandise	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  Nora 41.  2. Article Number (Transfer from serving label)		3. Service Type  4. Registered  4. Restricted Delivery? (Extra Fee)  3. Service Type  4. Restricted Delivery? (Extra Fee)	ot for Merchandise
3. Service Type  GO Certified Mail	for Merchandise	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  Nora 41.  2. Article Number (Transfer from serving label)	7008	3. Service Type  4. Registered  4. Restricted Delivery? (Extra Fee)  3. Service Type  4. Restricted Delivery? (Extra Fee)	ot for Merchandise
3. Service Type  G Certified Mail	for Merchandise  Yes  102595-02-M-1540	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  Nora 41.  2. Article Number (Transfer from serving label)	7008	If YES, enter delivery address below:  3. Service Type  22 Certified Mail   Express Mail   Registered   Return Receipt   Extra Fee)  4. Restricted Delivery? (Extra Fee)  3230 0002 4135 487.  Im Receipt	to for Merchandise Ves L 102595-02-M-1540
3. Service Type  28 Certified Mail  Return Receipt Reserving Reserving Return Receipt Reserving Reserving Reserving Reserving Return Receipt Return Receipt Return Receipt Return Receipt Reserving	for Merchandise  Yes  102595-02-M-1540	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  Nora 44  2. Article Number (Transfer from service label) PS Form 3811, February 2004  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3, Also comp	7008 Domestic Retu	If YES, enter delivery address below:  3. Service Type  20 Certified Mail   Express Mail   Registered   Return Receipt   Extra Fee)  3. Service Type  20 Certified Mail   C.O.D.  4. Restricted Delivery? (Extra Fee)  3. Service Type  3. Service Type  3. Service Type  4. Restricted Mail   C.O.D.  4. Restricted Delivery? (Extra Fee)  3. Service Type  4. Restricted Delivery? (Extra Fee)  3. Service Type  4. Restricted Delivery? (Extra Fee)  3. Service Type  4. Restricted Delivery? (Extra Fee)	ot for Merchandise Yes L 102595-02-M-1540
3. Service Type  G Certified Mail	for Merchandise  Yes  102595-02-M-1540	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543   **Danville Complete Items 1, 2, and 3. Also complete Items 1, 2, and 3. Also complete Items 4 if Restricted Delivery is desired.  Print your name and address on the rev	7008 Domestic Retu	If YES, enter delivery address below:  3. Service Type  20 Certified Mail   Express Mail   Registered   Return Receipt   Extra Fee)  3. Service Type  20 Certified Mail   C.O.D.  4. Restricted Delivery? (Extra Fee)  3. Service Type  4. Restricted Delivery? (Extra Fee)  3. Signature  4. Signature	to for Merchandise Yes L 102595-02-M-1540  BERY Agent Addressee
3. Service Type  G Certified Mail	for Merchandise  Yes  102595-02-M-1540	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  **Particle Number** (Transfer from service label) PS Form 3811, February 2004  **ENDER: COMPLETE THIS SECTION**  **Complete items 1, 2, and 3. Also complete items 4 if Restricted Delivery is desired.  **Print your name and address on the rev so that we can return the card to you.	7008 Domestic Retu	If YES, enter delivery address below:  3. Service Type  20 Certified Mail   Express Mail   Registered   Return Receipt   Extra Fee)  3. Service Type  20 Certified Mail   C.O.D.  4. Restricted Delivery? (Extra Fee)  3. Service Type  3. Service Type  3. Service Type  4. Restricted Mail   C.O.D.  4. Restricted Delivery? (Extra Fee)  3. Service Type  4. Restricted Delivery? (Extra Fee)  3. Service Type  4. Restricted Delivery? (Extra Fee)  3. Service Type  4. Restricted Delivery? (Extra Fee)	ot for Merchandise Yes  102595-02-M-1540  ERY Agent Addressee Jate of Delivery
3. Service Type  28 Certified Maii	for Merchandise  Yes  102595-02-M-1540  Agent Addressee Date of Delivery  -2. U-f	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543   **Danville Complete Items 1, 2, and 3. Also complete Items 1, 2, and 3. Also complete Items 4 if Restricted Delivery is desired.  Print your name and address on the rev	7008 Domestic Retu	If YES, enter delivery address below:  3. Service Type  00 Certified Mail   Express Mail   Registered   Return Receip   Insured Mail   C.O.D.  4. Restricted Delivery? (Extra Fee)  3230 0002 41,35 487.  Irrn Receipt  COMPLETE THIS SECTION ON DELIV.  A. Sighature  X.  B. Received by (Printed Name)	et for Merchandise  Yes  102595-02-M-1540  ERV  Agent Addressee 2, Date of Delivery
3. Service Type  28 Certified Mail  Return Receipt Reserved Return Receipt Reserved Return Receipt Reserved Return Receipt Reserved Return Receipt Return Re	for Merchandise  Yes  102595-02-M-1540  Agent Addressee Date of Delivery  -2. U-f	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  **Para 44.**  2. Article Number (Transfer from service inbel) PS Form 3811, February 2004  **SENDER: COMPLETE THIS SECTION**  **Complete items 1, 2, and 3. Also complier 4 if Restricted Delivery is desired. Print your name and address on the revision that we can return the card to you. Attach this card to the back of the mail.	7008 Domestic Retu	If YES, enter delivery address below:  3. Service Type  20 Certified Mail   Express Mail   Registered   Return Receipt   Extra Fee)  3. Service Type  20 Certified Mail   C.O.D.  4. Restricted Delivery? (Extra Fee)  3. Service Type  4. Restricted Delivery? (Extra Fee)  3. Signature  4. Signature	ot for Merchandise  Yes  102595-02-M-1540  ERY  Agent Addressee Date of Delivery  73-/-9 17
3. Service Type  Size Certified Mail   Express Mail   Redurn Receipt   Return Receipt   Respirate   Return Receipt   Respirate   Respirate	for Merchandise  Yes  102595-02-M-1540  Agent Addressee Date of Delivery -2_U_4 -2_U_5 Yes	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  **Para 44.**  2. Article Number (Transfer from service label) PS Form 3811, February 2004  **SENDER: COMPLETE THIS SECTION**  **Complete items 1, 2, and 3. Also compitem 4 if Restricted Delivery is desired. Print your name and address on the revision that we can return the card to you. Attach this card to the back of the mail or on the front if space permits.	7008 Domestic Retu	If YES, enter delivery address below:  3. Service Type  32 Certified Mail   Express Mail   Registered   Return Receipt  4. Restricted Delivery? (Extra Fee)  3230 0002 41,35 487.  Torn Receipt  6. Signature  7. Signature  8. Received by (Printed Name)  1. Is delivery address different from item	ot for Merchandise  Yes  102595-02-M-1540  ERY  Agent Addressee Quate of Delivery  73-/-9 17   Yes
3. Service Type  Size Certified Mail   Express Mail   Redurn Receipt   Return Receipt   Respirate   Return Receipt   Respirate   Respirate	for Merchandise  Yes  102595-02-M-1540  Agent Addressee Date of Delivery -2_U_4 -2_U_5 Yes	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  **Para 44.**  2. Article Number (Transfer from service label) PS Form 3811, February 2004  **SENDER: COMPLETE THIS SECTION**  **Complete items 1, 2, and 3. Also compitem 4 if Restricted Delivery is desired. Print your name and address on the revision that we can return the card to you. Attach this card to the back of the mail or on the front if space permits.	7008 Domestic Retu	If YES, enter delivery address below:  3. Service Type  32 Certified Mail   Express Mail   Registered   Return Receipt  4. Restricted Delivery? (Extra Fee)  3230 0002 41,35 487.  Torn Receipt  6. Signature  7. Signature  8. Received by (Printed Name)  1. Is delivery address different from item	ot for Merchandise  Yes  102595-02-M-1540  ERY  Agent Addressee Quate of Delivery  73-/-9 17   Yes
3. Service Type  28 Certified Mail   Express Mail   Return Receipt   Return Receipt   Return Receipt   Return Receipt   Restricted Delivery? (Extra Fee)  3230 0002 4135 4864  Return Receipt  COMPLETE THIS SECTION ON DELIVER A Signiture X  B. Received by (Printed Name)  D. Is delivery address different from item 17  If YES, enter delivery address below:	for Merchandise  Yes  102595-02-M-1540  Agent Addressee Date of Delivery -2_U_4 -2_U_5 Yes	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543   **Para 44.**  2. Article Number (Transfer from service inbel) PS Form 3811, February 2004  **SENDER: COMPLETE THIS SECTION  **Complete items 1, 2, and 3. Also compitem 4 if Restricted Delivery is desired. Print your name and address on the revision that we can return the card to you. Attach this card to the back of the mail or on the front if space permits.  1. Article Addressed to:  Levisa Coal Corp. c/o John C. Irvin	7008 Domestic Retu	If YES, enter delivery address below:   3. Service Type	ot for Merchandise  Yes  102595-02-M-1540  ERY  Agent Addressee Quate of Delivery  73-/-9 17   Yes
3. Service Type  28 Certified Maii  Return Receipt Reserved Reserved Reserved Reserved Return Receipt Reserved	for Merchandise  Yes  102595-02-M-1540  Agent Addressee Date of Delivery -2_U_4 -2_U_5 Yes	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543   **Para 44.**  2. Article Number (Transfer from sen to label) PS Form 3811, February 2004  **SENDER: COMPLETE THIS SECTION  **Complete items 1, 2, and 3. Also compitem 4 if Restricted Delivery is desired. Print your name and address on the revision to the revision on the front if space permits.  1. Article Addressed to:  Levisa Coal Corp. c/o John C. Irvin 4710 Hunterwood Circle	7008 Domestic Retu	If YES, enter delivery address below:  3. Service Type  32 Certified Mail   Express Mail   Registered   Return Receipt  4. Restricted Delivery? (Extra Fee)  3230 0002 41,35 487.  Torn Receipt  6. Signature  7. Signature  8. Received by (Printed Name)  1. Is delivery address different from item	ot for Merchandise  Yes  102595-02-M-1540  ERY  Agent Addressee Date of Delivery  73-/-9 17
3. Service Type  2 Certified Mail	for Merchandise  Yes  102595-02-M-1540  Agent Addressee Date of Delivery -2-W-7 No	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543   **Para 44.**  2. Article Number (Transfer from service inbel) PS Form 3811, February 2004  **SENDER: COMPLETE THIS SECTION  **Complete items 1, 2, and 3. Also compitem 4 if Restricted Delivery is desired. Print your name and address on the revision that we can return the card to you. Attach this card to the back of the mail or on the front if space permits.  1. Article Addressed to:  Levisa Coal Corp. c/o John C. Irvin	7008 Domestic Retu	If YES, enter delivery address below:   3. Service Type   D2 Certified Mail   Express Mail   Registered   Return Receipt   Responsible	ot for Merchandise  Yes  102595-02-M-1540  ERY  Agent Addressee Date of Delivery  3-1-9 17 Yes
3. Service Type  G Certified Maii	for Merchandise  Yes  102595-02-M-1540  102595-02-M-1540  Agent Addressee Date of Delivery -2-U 7   Yes   No	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  **Programs of the Polyage of	7008 Domestic Returned to the control of the contro	3. Service Type   Discrete   Co.D.	to the for Merchandise  Yes  102595-02-M-1540  ERY  Agent Addressee Jate of Delivery 12 Yes No
3. Service Type  2 Certified Mail	for Merchandise  Yes  102595-02-M-1540  Agent Addressee Date of Delivery -2-W-7 No	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  **Nora 44.**  2. Article Number (Transfer from service label) PS Form 3811, February 2004  **SENDER: COMPLETE THIS SECTION  **Complete items 1, 2, and 3. Also compitem 4 if Restricted Delivery is desired. Print your name and address on the rev so that we can return the card to you.  **Attach this card to the back of the mail or on the front if space permits.  1. Article Addressed to:  Levisa Coal Corp. c/o John C. Irvin 4710 Hunterwood Circle Richmond, TX 77469	7008 Domestic Returned to the control of the contro	If YES, enter delivery address below:   3. Service Type   D2 Certified Mail   Express Mail   Registered   Return Receipt   Responsible	ot for Merchandise  Yes  102595-02-M-1540  ERIY  Agent Addressee  Date of Delivery  3-5-9 17 98
3. Service Type  G Certified Maii	for Merchandise  Yes  102595-02-M-1540  102595-02-M-1540  Agent Addressee Date of Delivery -2-U 7   Yes   No	Harrison-Wyatt, LLC PO Box 11000 Danville, VA 24543  **Programs of the Polyage of	7008 Domestic Returned to the state of the s	3. Service Type   Discrete   Co.D.	to for Merchandise  Ves  102595-02-M-1540  ERY  Agent Addressee Date of Delivery 17 Ves No
	If YES, enter delivery address below:    Sold   VMM Rd	Salo   I vivin Rcd	1. Article Addressed to:   If YES, enter delivery address below:	D. Is delivery address different from item 1? Gres If YES, enter delivery address below: No Solo I will Rd.  Humington, Wartos 3347  3. Service Type Insured Mail Express Mail Receipt for Merchandise Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee) Ves  5. 3230 0002 41,35 4826  COMPLETE THIS SECTION ON DELIVERY A. Signature D. Is delivery address different from item 1? Ves If YES, enter delivery address below: No Service Type Certified Mail Express Mail Conditions on the reverse so that we can return the card to by ou.  3. Service Type Certified Mail Express Mail Conditions on the reverse so that we can return the card to you.  4. Restricted Delivery? (Extra Fee) Ves  6. Received by (Printed Name) Ves If YES, enter delivery address below: No Service Type Certified Mail Express Mail Receipt for Merchandise Insured Mail Conditions on the reverse so that we can return the card to you.  4. Restricted Delivery? (Extra Fee) Ves  6. 3230 0002 41,35 4840  Return Receipt  COMPLETE THIS SECTION ON DELIVERY A. Signature A. Signature  COMPLETE THIS SECTION ON DELIVERY A. Signature  COMPLETE THIS SECTION  COMPLETE THIS SECTION	D. Is delivery address different from lam If 1 G Yes If YES, enter delivery address below:   No   Solido   Yuvin Rd   No   Solido   Yuvin Rd   No   No   No   No   No   No   No   N

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

■ Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY			
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature  X			
so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Deliver			
Article Addressed to:	D. Is delivery address different from item 1? Yes  If YES, enter delivery address below: No			
Richard K. Pobst				
1024 Oxford Rd				
St Augustine, FL 32084-1821	3. Service Type			
Nora46FP	4. Restricted Delivery? (Extra Fee) ☐ Yes			
2. Article Number 7008	3230 0002 4135 4932			
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-18			
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY			
Complete items 1, 2, and 3. Also complete	A. Signature			
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	XN. Colless Agent Address			
<ul> <li>so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery			
1. Article Addressed to:	D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No			
55%	(3)			
Catherine Pobst	MAR <b>2 6</b> 2009			
c/o Lynn R. Quick	3. Service type			
111 Postelle St	Certified Mail Express Mail			
Cartersville, GA 30120	☐ Registered ☐ Receipt for Merchandi ☐ Insured Mail ☐ C.O.D.			
NorayleFP	4. Restricted Delivery? (Extra Fee) Yes			
2. Article Numbe (Transfer from service label)	3230 0002 4135 4949			
	eturn Receipt 102595-02-M-15			
	COMPLETE THIS SECTION ON DELIVERY			
SENDER: COMPLETE THIS SECTION	A. Signature			
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	Wall le ma offer			
Print your name and address on the reverse	P Second N' (Printed Name) C. Date of Deliv			
so that we can return the card to you.	B. Received by (Printed Name) C. Date of Delli			
Attach this card to the back of the mailpiece.	JUITU W HOST NE			
<ul> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	D is delivery address different from item 1? Yes			
Attach this card to the back of the mailpiece,	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No			
Attach this card to the back of the mailpiece, or on the front if space permits.	D. Is delivery address different from item 1.			
Attach this card to the back of the mailpiece, or on the front if space permits.	D. Is delivery address different from item 1.			
Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:	D. Is delivery address different from item 1.			
<ul> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>John W. Pobst, Jr</li> </ul>	If YES, enter delivery address below:			
<ul> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>John W. Pobst, Jr Box 86</li> </ul>	If YES, enter delivery address below: No  3. Service Type  X Certified Mail  Express Mail			

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

3. Service Type

M. Ceptified Mail

D.C.O.D.

Incured Mail

4. Restricted Delivery? (Extra Fee)

SƏJ.

C. Date of Delivery hagent 
Addressee

PS Form 3811, February 2004

2. Article Number (Transfer from service label)

S684 SETH 2000 DEZE 8002 Nora 41, PP

Nashville, TN 37212 2418 W. Linden St

Meredith Jennings

D. Is delivery address different from item 1? 

If YES, enter delivery address below: 

If YES, enter delivery address below: 1. Article Addressed to:

X

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3, Also complete item 4 if Restricted Delivery is desired.

So that we can return the card to you.

Aftend this card to the back of the mailpiece, or on the front if space permits.

CNX Gas Company LLC Attn: Pooling 2481 John Nash Blvd Bluefield, WV 24701



GERMINIED

02 1P \$ 005.90°
MAILED FROM ZIP CODE 24701

Virginia be & Phillip Linwick 4324 S. Bell-Dr Veradae, WA 99037

CNX Gas Compa Attn: Pooling 2481 John Nash Bluefield, WV 24701

...

CERTIFIED MAIL

D. Is delivery address different from item 1? Tes, enter delivery address below:

COMPLETE THIS SECTION ON DELIVERY

□ Yes

☐ Agent☐ Addressee☐. Date of Delivery

Express Mail
 Return Receipt for Merchandise
 C.O.D.

PS Form 3811, February 2004

2008 3530 0005 4135 4355

IsM Certified Mail

3. Service Type

X

4. Restricted Delivery? (Extra Fee) Registered ☐ Insured Mail

B. Received by (Printed Name)

Rose Allen Matthews 635 Highland Dr Eden, NC 27288

2. Article Number (Transfer from service label)

MONO HEEP

Eden, NC 27288 O35 Highland Dr Rose Allen Matthews

1. Article Addressed to:

ER: COMPLETE THIS SECTION

Their item 4 if Restricted Delivery is desired.

Item 4 if Restricted Delivery is desired.

Finit your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailplece, or or or the font if space permits.

☐ INSUFFICIENT ADDRESS
☐ ATTEMPTED NOT KNOWN
☐ NO SUCH NUMBER/ STREET
☑ NOT DELIVERABLE AS ADDRESSED
- UNABLE TO FORWARD OTHER

հերիդերի հետերի հետերի հուրդուրդին

MATHIFIELD

CNX Gas Company LL Attn: Pooling 2481 John Nash Blvd Bluefield, WV 24701

UNITED \$ 005.90°

MTE

#### BEFORE THE VIRGINIA GAS AND OIL BOARD

Combined w/ 5)
VGOB 4/21/09
Approved

APPLICANT: CNX Gas Company LLC

DIVISION OF GAS AND OIL DOCKET VGOB 89-0126-0009-46

RELIEF SOUGHT:

MODIFICATION OF NORA COAL BED GAS FIELD RULES ORDER

**AFFECTED UNITS: AP-81 and AU-92** 

See annexed Exhibit A.

#### NOTICE OF HEARING

**HEARING DATE:** 

April 21, 2009

PLACE:

Southwest Virginia Higher Education Center

Campus of the Virginia Highlands Community College

Abingdon, Virginia

TIME:

9:00 AM

#### **COMMONWEALTH OF VIRGINIA:**

**To:** Levisa Coal Corporation, ACIN, LLC, Fairview Limited Partnership, Carol & John C. Irvin, III, F.H. Combs Testamentary Trust, Martha E. Combs, John W. Pobst, Jr., Virginia Lee & Phillip Linwick, Richard K. Pobst, Catherine Pobst, Meredith E. Jennings, Range Resources-Pine Mountain, Inc., Harrison-Wyatt, LLC, Sidney Asbury, Rose Allen Matthews

- Applicant and its counsel: Applicant is CNX Gas Company LLC, 2481 John Nash Blvd., Bluefield, VA 24701, (304) 323-6500. Applicant's Counsel is Mark A. Swartz, 601 Sixth Avenue, Suite 201, St. Albans, WV 25177-1808.
- 2. Relief sought: (1) Modification of the Nora Coal Bed Gas Field Rules established by the Oil and Gas Conservation Board's Order entered March 26, 1989, as amended, to allow more than one coalbed gas well to be drilled within each of the Nora Field Units identified above. (2) An administrative order providing that additional well permits may be issued in the Nora Coal Bed Gas Field after this application is filed and while it is pending.
- 3. **Proposed provisions of order:** That a second coalbed methane gas well may be drilled in each of the above referenced Nora Units if same is located within the drilling windows of said Units and is at least 600 feet from any other coalbed methane well; and that production/royalties from each coalbed methane well drilled in the said Units shall continue to be allocated solely to the owners and claimants of and to the coalbed methane within the Unit in which the well(s) is located.
  - Legal Authority: Va. Code Ann. §45.1-361.20 and 4 VAC 25-160-50.
  - 5. Type of well(s) and field: Coalbed methane wells and Nora Coal Bed Gas Field.
  - 6. Your interest or claim in the unit sought to be created by this Application pertains to coalbed methane gas.
  - Formation(s) to be produced and estimates: From the top of the Raven and below.
     See Nora Coal Bed Gas Field Rules, as amended.
  - 8. <u>Attestation:</u> The foregoing notice to the best of my knowledge, information, and belief is true and correct.

**NOTICE IS FURTHER GIVEN** that this cause has been set for hearing and the taking of evidence before the Board at 9:00 AM, on **April 21, 2009**, at the Southwest Virginia Higher Education Center, Campus of the Virginia Highlands Community College, Abingdon, Virginia, and that notice will be published as required by law and the rules of the Board.

NOTICE IS FURTHER GIVEN that you may attend this hearing, with or without an attorney, and offer evidence or state any comments you have. For further information or a copy of the application and exhibits, either contact the Virginia Gas and Oil Board, State Oil and Gas Inspector, Department of Mines, Minerals and Energy, Division of Gas and Oil, P. O. Box 1416, Abingdon, Virginia 24210, 276/676-5423 or the Applicant at the address shown above.

DATED: 3 20 09

CNX Gas Company LLC

Applicant

By:

Anita D. Duty Pooling Supervisor 2481 John Nash Boulevard Bluefield, WV 24701

#### BEFORE THE VIRGINIA GAS AND OIL BOARD

APPLICANT: CNX Gas Company LLC

DIVISION OF GAS AND OIL DOCKET: VGOB 89-0126-0009-46

RELIEF SOUGHT: MODIFICATION OF

MODIFICATION OF NORA COAL BED GAS FIELD RULES ORDER

AFFECTED UNITS: AP-81 and AU-92

See annexed Exhibit A.

#### APPLICATION

- 1. Applicant and its counsel: Applicant is CNX Gas Company LLC, 2481 John Nash Blvd., Bluefield, VA 24701, (304) 323-6500. Applicant's Counsel is Mark A. Swartz, 601 Sixth Avenue, Suite 201, St. Albans, WV 25177-1808.
- 2. Relief sought: (1) Modification of the Nora Coal Bed Gas Field Rules established by the Oil and Gas Conservation Board's Order entered March 26, 1989, as amended, to allow more than one coalbed gas well to be drilled within each of the Nora Field Units identified above. (2) An administrative order providing that additional well permits may be issued in the Nora Coal Bed Gas Field after this application is filed and while it is pending.
  - 3. Legal authority: 4 VAC 25-160-50 and § 45.1-361.20 of the Code of Virginia.
- 4. <u>Proposed provisions of order sought:</u> That a second coalbed methane gas well may be drilled in each of the above referenced Nora Units if same is located within the drilling windows of said Units and is at least 600 feet from any other coalbed methane well; and that production/royalties from each coalbed methane well drilled in the said Units shall continue to be allocated solely to the owners and claimants of and to the coalbed methane within the Unit in which the well(s) is located.
- Type of wells and field: Coalbed methane frac wells within the portion of the Nora Coal Bed Gas Field described above.
- Formations subject to application: From the top of the Raven and below. See Nora Coal Bed Gas Field Rules, as amended.
- Plat: See Exhibit A annexed hereto which shows the location of the Nora Units affected by this application within the Nora Coal Bed Gas Field.

The exterior boundaries of the units mapped on Exhibit A are:

Beginning at a point, Virginia State Plane NAD 27 coordinate of N: 318515.430 E: 937908.050; S87° 47'14" E 285.14 feet to a point; S01° 48'21" W 216.42 feet to a point; S87° 47'16" E 1867.90 feet to a point; S02° 12'44" W 1383.64 feet to a point; N87° 47'16" W 2154.20 feet to a point; N02° 11'54" E 1600.06 feet to a point of beginning, containing +/81)

Beginning at a point, Virginia State Plane NAD 27 coordinate of N: 310166.240 E: 955189.890; S87° 50'06" E 1369.56 feet to a point; S02° 13'15" W 1925.13 feet to a point; N87° 46'45" W 1369.57 feet to a point; N02° 13'16" E 1923.80 feet to a point of beginning, containing +/- 60.49 acres. (Unit AU-92)

8. The acreage affected: See Exhibit A annexed hereto. Acreage affected is approximately 130,33 acres.

By:

9. Attestation: The foregoing application to the best of my knowledge, information and belief is true and correct.

CNX Gas Company LLC, Applicant

Anita D. Duty

Pooling Supervisor 2481 John Nash Boulevard Bluefield, WV 24701

